

PART B—ISSUE FEE TRANSMITTAL

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JC33
JUN 27 2000
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GM12/0327

CLAUDE A. S. HAMRICK
OPPENHEIMER WOLFF & DONNELLY LLP
3373 HILLVIEW AVENUE, SUITE 200
PALO ALTO CA 94304

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I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Cheryl Rogers
(Depositor's name)
Cheryl Rogers
(Signature)
June 27, 2000
(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/981,882	03/10/98	015	PARADISO, J	3713 03/27/00
First Named Applicant	ALCORN,		35 USC 154(b) term ext. =	0 Days.

TITLE OF INVENTION ELECTRONIC CASINO GAMING SYSTEM WITH IMPROVED PLAY CAPACITY, AUTHENTICATION AND SECURITY

06/30/2000 CVO222 00000006 08901802

01 FC:142
02 FC:561

1210.00 0P

ATTY'S DOCKET NO.	CLASS/SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3 38184-0026US	463-029.000	K33	UTILITY	NOYES	\$1,210.00 \$605.00	06/27/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Claude A.S. Hamrick
Oppenheimer W. Donnelly

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE *Silicon Gaming, Inc.*

(B) RESIDENCE: (CITY & STATE OR COUNTRY) *Palo Alto, California*

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual corporation or other private group entity government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

Issue Fee

Advance Order - # of Copies *10*

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

Claude A. S. Hamrick

(Date)

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PALO ALTO, CALIFORNIA

MAR 3 1 2000

DOC. # *38184-26*
PAID *Issue Fee & Drawings* *6/27/00*
FILED O/M C80/SEC

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